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University of Utah
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Chief Clinical Information Officer

Equity Steering Committee Inaugural Chair

Regional Clinical Informatics Director

Cardiovascular Clinical Program Manager

Senior Information Analyst/Project Manager
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University of Utah
Associate Professor

Woman's World Health Initiative
Board of Directors

Multiple Sclerosis Society Idaho-
Nevada-Utah Board of Trustees





Intermountain Healthcare Scope & Stewardship



25* Hospitals
*One Virtual Hospital



6 States, plus Alaska
525,000+ Virtual
Interactions



225
Physician Clinics



42,000
Caregivers



900,000
SelectHealth Members



\$225M
Charity Care



50% of Utahns
Receive Services
Annually



10,000+ Enrolled in
Student Placement
Programs Annually



\$2.7B Annual
Supply Chain Spend



Intermountain®
Healthcare Delivery Institute
Advanced Training Program

Care Transformation Information Systems

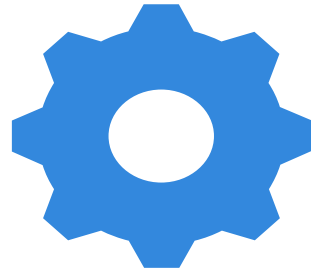
Clinical Informatics and Customer Experience Key Functions

Business Solution Consulting	Design & Development, System Integration	Application Support	Risk Management	Data Management, Data Analytics & Visualizations	Content Management
<ul style="list-style-type: none">• Gap/Current-State Analysis• Defining Requirements and Scope• Defining roadmap• Workflow analysis• Workflow Design• Research• Informatics• Interoperability	<ul style="list-style-type: none">• Design of a solution• Build and Validation: e.g., orders, CDS rules• Implementation of vended solutions• Clinical Decision Support	<ul style="list-style-type: none">• Break/fixes• Adoption and Support• Training (and Mastery)• Performance Tuning	<ul style="list-style-type: none">• Monitoring: e.g., safety, alerts, billing	<ul style="list-style-type: none">• Clinical informatics data driven improvement• Operations Reports – partnership with operations, data analytics, and data infrastructure	<ul style="list-style-type: none">• Knowledge Management

Putting Technology Solutions into Context



Prioritize projects



Understand process &
problems to be solved

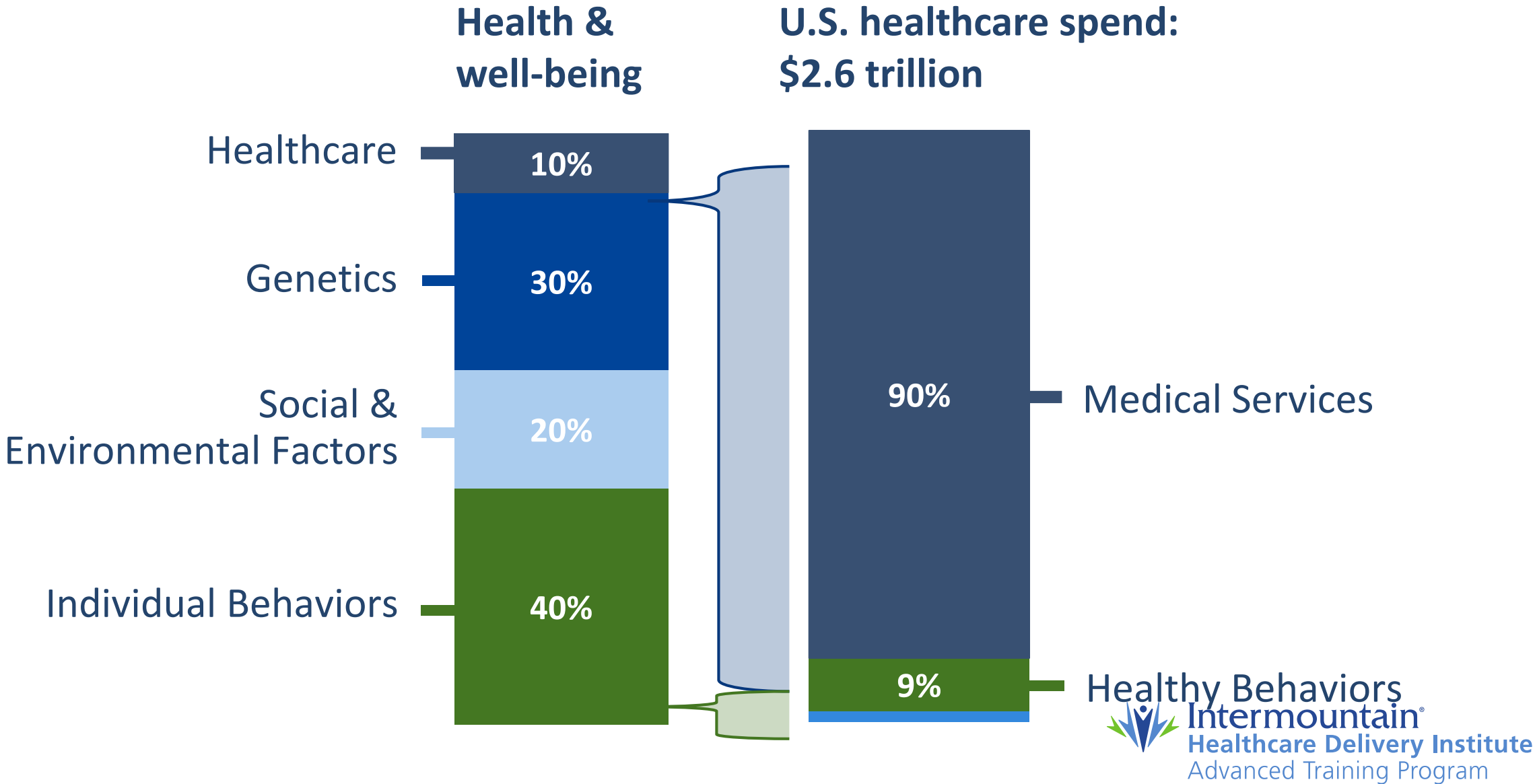


Address process
and people issues



Consider technology
solutions

Mismatch Between Drivers of Health and Spending



Barriers and Opportunities

Value Based Reimbursement

- Models that include community health workers and other roles focused on social needs
- Services rendered from community-based organizations
- Coding and provider reimbursement for clinical social care

Interoperability & Regulations

- Interoperability to share social and insurance data in real time
- Flexibility within STARK, patient inducement, and member recruitment regulations that impede social care assistance
- HIPAA requirements for social care referrals on patient's behalf
- National master person identifier

Funding & Rewards

- Rural communities addressing resource gaps (housing, transportation)
- Waivers that support innovation and best practices for social care
- Funding for costly technology that supports social care coordination
- Value based social care reimbursement models for providers, states, health plans, or a combination of these organizations